

Attachment C to Pérez Declaration

BRENNAN CENTER FOR JUSTICE, INC.

Case 2:13-cv-00193 Document 1174-14 Filed on 07/15/19 in TXSD Page 2 of 62

Payee
Vendor ID

Account #:

8448
8448
1/21/2014

Invoice	Description	Discount	Amount
	- Indept. Contractor Agreement for 12/19/13 - 12/30/13	\$0.00	\$4,000.00
Total :		\$0.00	\$4,000.00

PRODUCT FLAVOR

A

Date	Time Spent (In minutes)	Activity	result
19-Dec	10		
19-Dec	10		
19-Dec	10		
19-Dec	60		
20-Dec	10		
20-Dec	20		
19-Dec	10		
20-Dec	5		
19-Dec	10		
20-Dec	15		
20-Dec	10		
20-Dec	5		
20-Dec	10		
20-Dec	5		
20-Dec	10		
20-Dec	35		
20-Dec	30		
23-Dec	5		
26-Dec	5		
23-Dec	60		
26-Dec	40		
27-Dec	5		
27-Dec	15		
27-Dec	10		
27-Dec	10		
27-Dec	55		
27-Dec	10		
27-Dec	5		
27-Dec	10		
27-Dec	15		
27-Dec	50		
27-Dec	35		
28-Dec	5		
28-Dec	120		
28-Dec	65		
28-Dec	5		
29-Dec	15		
29-Dec	75		

29-Dec	15
29-Dec	5
30-Dec	5
30-Dec	5
30-Dec	15
30-Dec	5
30-Dec	5
30-Dec	5
30-Dec	20
30-Dec	15
30-Dec	5
30-Dec	30
30-Dec	15
31-Dec	15
30-Dec	5
31-Dec	10
31-Dec	30
31-Dec	20
31-Dec	55
2-Jan	45
2-Jan	30
2-Jan	25
2-Jan	5
5-Jan	35
6-Jan	5
6-Jan	35
6-Jan	25
6-Jan	30
6-Jan	5
6-Jan	5

6-Jan	5
6-Jan	10
6-Jan	70
6-Jan	25
6-Jan	5
6-Jan	15
7-Jan	30
7-Jan	20
7-Jan	65
7-Jan	80
7-Jan	10
8-Jan	25
8-Jan	25
8-Jan	90
8-Jan	120
8-Jan	15
9-Jan	20
9-Jan	10
9-Jan	10
9-Jan	5
9-Jan	15
9-Jan	65
10-Jan	10
9-Jan	50
10-Jan	5
10-Jan	75
10-Jan	70
10-Jan	10
10-Jan	40

Total	2400
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Payee
Vendor ID

Account #:

8504
2/10/2014

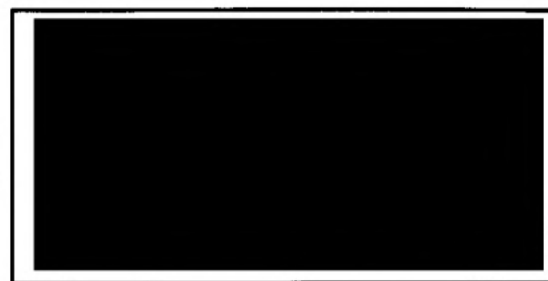
Invoice	Description	Discount	Amount
	- Hours worked & Expenses for Texas Litigation, 02/05/14	\$0.00	\$3,800.00
<div>Return to [REDACTED]</div>			
Total :		\$0.00	\$3,800.00

Payee
Vendor ID

Account #:

10070
10070
3/6/2015

Invoice	Description	Discount	Amount
	TX Photo ID work, Dec.'14 02/19/15	\$0.00	\$300.00
Total :		\$0.00	\$300.00



INVOICE #



Date: February 19, 2015



Please remit payment to:

**BILL TO:**

Brennan Center

Period Covered December 2014

Description of Work: Texas Voter ID Project

Ordered by



Date	Description of Work	Rate/Hr	Hours	Amount
December 2014		\$20.00	15	\$300.00
Grand Total			\$300.00	

CONSULTANT SERVICE AND TRAVEL INVOICE

Billed to: The Brennan Center
Contact: Vishal Agraharkar

Purchase Order #
Invoice # (unique #)
Invoice Date
Invoice Period (From
mm/dd/yy to mm/dd/yy)

6-16-2014
6-01-14 - 6-14-14

Consultant Name:
Email Address:
Mailing Address:

Labor (days/dates services were performed, description of services, rate and unit of rate by hours, days or other unit)				
Date(s) of Service	Description of Services	Rate	Unit (Hours/Days/ Other)	Total Cost
4/4		\$100	10.75	1,075
4/5		\$100	7	700
4/6		\$100	7.75	775
4/8		\$100	7.5	750
4/9		\$100	7	700
Total Labor			\$100	4000

Deliverables/Milestones (description of deliverable/milestone, due date, type of deliverable and percent complete, if applicable)				
Description	Due Date	Type	% Complete	Amount
Total Deliverable/Milestone Billing				0

Authorized Travel Expenses (ticket stubs, hotel and other supporting receipts must accompany this invoice)								
Date(s) & Place(s) of Travel	Airfare/Rail	Rental Car	Lodging	Per Diem/Meals	Personal Vehicle Miles	Mileage Cost	Other	Total
4/4-4/9 mileage					873	.5		\$436.50
4/4-4/9 meals				\$90.06		0		\$90.06
4/8 pens, paper, clipboard						0	\$13.34	\$13.34
						0		0
Total Travel	0	0	0	0	0	0	0	\$539.90

Enter Current Mileage Rate (click link):
[GSA Website \(mileage reimbursement\)](#)

.5

Totals	
Invoice Total Claimed for Services (Labor/Deliverables/Milestones)	\$4,000
Invoice Total Claimed for Travel	\$539.90
Invoice Total Amount Claimed	\$4,539.90

Approval	
Consultant	Client

I, the undersigned, hereby certify that the charges contained in this invoice are true and correct to the best of my knowledge.

Invoice Approved for Payment.

Signature

Project Manager/Director's Printed Name

Date

CONSULTANT SERVICE AND TRAVEL INVOICE

Billed to:

The Brennan Center for Justice
 Contact: Vishal Agraharkar
 161 Ave of the Americas
 12th Floor
 New York, New York 10013

Purchase Order #

Invoice # (unique #)

Invoice Date

Invoice Period

(From mm/dd/yyyy to mm/dd/yyyy)

07-06-2014

06/15/2014 - 7/01/2014

Consultant Name:

Email Address:

Mailing Address:

Labor (days/dates services were performed, description of services, rate and unit of rate by hours, days or other unit)				
Date(s) of Service	Description of Services	Rate	Unit Qty (Hours, Days, Other)	Total Cost
6/15		\$100	8	\$800
6/30		\$100	6	\$600
7/1		\$100	6	\$600
				0
				0
Total Labor			20	\$2000

Deliverables/Milestones (description of deliverable/milestone, due date, type of deliverable and percent complete, if applicable)				
Description	Due Date	Type (Deliverable, Milestone, Other)	% Complete	Amount
Total Deliverable/Milestone Billing				0

Authorized Travel Expenses (ticket stubs, hotel and other supporting receipts must accompany this invoice)								
Date(s) & Place(s) of Travel	Airfare or Rail	Rental Car	Lodging	Per Diem or Meals	Personal Vehicle Miles	Mileage Cost	Other	Total
6/15 - 7/1 Mileage					252	.5		\$126
6/15 - 7/1 Meals				31.40		0		\$31.40
						0		0
						0		0
Total Travel	0	0	0	0	0	0	0	\$157.40

Enter Current Mileage Rate (click link for current rate):

GSA Website (mileage reimbursement)

.56

Totals	
Invoice Total Claimed for Services (Labor/Deliverables/Milestones)	2000
Invoice Total Claimed for Travel	157.40
Invoice Total Amount Claimed	\$2157.40

Approval	
Consultant	Client

I, the undersigned, hereby certify that the charges contained in this invoice are true and correct to the best of my knowledge.



Consultant's Printed Name

Date

Invoice Approved for Payment.

Signature

Project Manager/Director's Printed Name

Date

CONSULTANT SERVICE AND TRAVEL INVOICE

Billed to:

The Brennan Center for Justice
Contact: Vishal Agraharkar
161 Ave of the Americas
12th Floor
New York, New York 10013

Purchase Order #
Invoice # (unique #)
Invoice Date
Invoice Period
(from mm/dd/yy to mm/dd/yy)

08-07-2014
07/02/2014 -- 8/01/2014

Consultant Name:
Email Address:
Mailing Address:

Labor (days/dates services were performed, description of services, rate and unit of rate by hours, days or other unit)				
Date(s) of Service	Description of Services	Rate	Unit Qty <small>(Hours, Days, Other)</small>	Total Cost
7/9		\$100	6	\$600
7/14		\$100	1	\$100
7/18		\$100	3	\$300
7/21		\$100	2	\$200
				0
Total Labor			12	\$1,200

Deliverables/Milestones (description of deliverable/milestone, due date, type of deliverable and percent complete, if applicable)				
Description	Due Date	Type <small>(Deliverable, Milestone, Other)</small>	% Complete	Amount
Total Deliverable/Milestone Billing				0

Authorized Travel Expenses (ticket stubs, hotel and other supporting receipts must accompany this invoice)								
Date(s) & Place(s) of Travel	Airfare or Rail	Rental Car	Lodging	Per Diem or Meals	Personal Vehicle Miles	Mileage Cost	Other	Total
7/9 - 7/21 Mileage					222	.5		\$110.00
7/9 - 7/21 Meals				42.77		0		\$42.77
						0		0
						0		0
Total Travel	0	0	0	0	0	0	0	\$152.77
Enter Current Mileage Rate (click link for current rate): GSA Website (mileage reimbursement)						.56		

Totals	
Invoice Total Claimed for Services <small>(Labor/Deliverables/Milestones)</small>	1,200.00
Invoice Total Claimed for Travel	152.77
Invoice Total Amount Claimed	\$1,352.77

Approval	
Consultant	Client
I, the undersigned, hereby certify that the charges contained in this invoice are true and correct to the best of my knowledge. <div></div>	Invoice Approved for Payment. _____ Signature _____ Project Manager/Director's Printed Name <div></div> _____ Date



WATABLER

Restaurant 301
1400 Central Blvd
Brownsville TX 78520
(361) 541-3144
General Manager: Anna Roxanna
1-800-654-1234

7/18/2014 12:19:50 PM
Order: 952172 Cashier: Gracie R

1 SM DRINK 1.69
Subtotal 1.69
Tax 0.14
Total 1.83

Visa 1.83
Account: XXXX-XXXX4315

Approval: 134930



House & Bistro

1717 83
4041 E. I 78521
(956) 994-8131

07/09/2014
3:55 PM

#10012

13.00

Balance 07

DIRTY AL'S
(956) 761-4901
Table Sales

Check No 630601/1
Tab 22 Server 1023 Guests 3

3 Lg Fried Fish 12.99
1 French Fries 3.25
Food Sub-Total 16.24

SUB TOTAL 16.24
Sales Tax 1.04
Mix Bev Sales Tax 0.00

AL: 17.50
SUGGESTED GRATUITY
15% 2.63
20% 3.50
25% 4.38

Thank you,

5:17:19 PM

Thank you for visiting

Luby's
Brownsville #1 (20)
2124 E. Chica Blvd
Brownsville, TX 78521
408-1062

Check # 691921

Glenn
21 JUL 2014 12:13

1 Fried Chicken L 7.89
1 \$6.99 Salad Up 0.69
Tray #1 Subtotal 8.58

Subtotal 8.58
Sales Tax 0.71

Please pay this amount
Total 9.29

RECEIVED OCT 28 2013

[REDACTED]
Research for Voter ID Law

10-25-14
9:00 am to 6:00pm

[REDACTED]
110 Miles to drive to and from Brownsville, To Weslaco and Esla.

9 X 50 =\$450.00
110 X .50 = \$55.00

\$505.00 Total.

Invoice:

11/4/2014 3:30 to 7:30pm

[REDACTED]

11/7/14 10:30-11:30 AM

[REDACTED]

Total 5 Hours X \$50.00 an Hour = \$250.00

80 Miles X \$.50 a mile = \$40.00

total= \$290.00

Date _____

Rayee
Vendor ID

Account #:

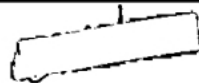
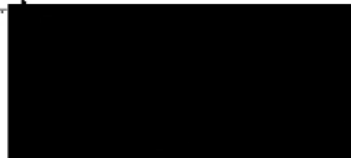
9673
11/25/2014

Invoice	Description	Discount	Amount
	Prof. Services, VRE, 11/17/14	\$0.00	\$1,012.50
Total :		\$0.00	\$1,012.50

Timesheet - week ending 11/14/14

date	hours	task(s)
10-Nov	8	
11-Nov	0	
12-Nov	8.25	
13-Nov	7.75	
14-Nov	7.5	
TOTAL	31.5	

DUE \$ 1,102.50

Please make
payable to:

MP approved
11/17/2014

OSF Funds

CONSULTANT SERVICE AND TRAVEL INVOICE

Billed to: The Brennan Center
Contact: Vishal Agraharkar

Purchase Order #
Invoice # (unique #)
Invoice Date
Invoice Period
(From mm/dd/yy to mm/dd/yy)

10-06-2014
10/01/14 - 10/27/14

Consultant Name:
Email Address:
Mailing Address:

Labor (days/dates services were performed, description of services, rate and unit of rate by hours, days or other unit)				
Date(s) of Service	Description of Services	Rate	Unit Qty (Hours, Days, Other)	Total Cost
10/21 & 10/22		\$100	16	\$1600
10/23		\$50	8	\$400
10/25		\$50	8	\$400
10/26		\$50	5	250
10/27		\$50	6	300
Total Labor			43	\$2950

Deliverables/Milestones (description of deliverable/milestone, due date, type of deliverable and percent complete, if applicable)				
Description	Due Date	Type (Deliverable, Milestone, Other)	% Complete	Amount
Total Deliverable/Milestone Billing				0

Authorized Travel Expenses (ticket stubs, hotel and other supporting receipts must accompany this invoice)								
Date(s) & Place(s) of Travel	Airfare or Rail	Rental Car	Lodging	Per Diem or Meals	Personal Vehicle Miles	Mileage Cost	Other	Total
10/21 - 10/26 Mileage					823	.5		\$411.50
10/21 - 10/27 Meals				136.27		0		\$136.27
Miscellaneous				12.90		0		12.90
						0		0
Total Travel	0	0	0	0	0	0	0	\$560.67
Enter Current Mileage Rate (click link for current rate): GSA Website (mileage reimbursement)						.56		

Totals	
Invoice Total Claimed for Services (Labor/Deliverables/Milestones)	2950.00
Invoice Total Claimed for Travel	560.67
Invoice Total Amount Claimed	\$3510.67

Approval	
Consultant	Client

I, the undersigned, hereby certify that the charges contained in this invoice are true and correct to the best of my knowledge.

Consultant's Printed Name

Date

Invoice Approved for Payment.

Signature

Project Manager/Director's Printed Name

Date

Payee
Vendor iD

Account #:

9710
9710
12/4/2014

Invoice	Description	Discount	Amount
		\$0.00	\$1,225.00
Total :		\$0.00	\$1,225.00

RECEIVED NOV 24 2014

to use
Check Request
Form

VRE

Timesheet - week ending 11/21/14

date	hours	task(s)
17-Nov	5	
18-Nov	5.5	
19-Nov	8	
20-Nov	8	
21-Nov	8.5	
TOTAL	35	

DUE \$ 1,225.00 ✓

Please make
payable to:

Payee

9734

Vendor ID

Account #:

12/9/2014

Invoice	Description	Discount	Amount
		\$0.00	\$682.50
Total :		\$0.00	\$682.50

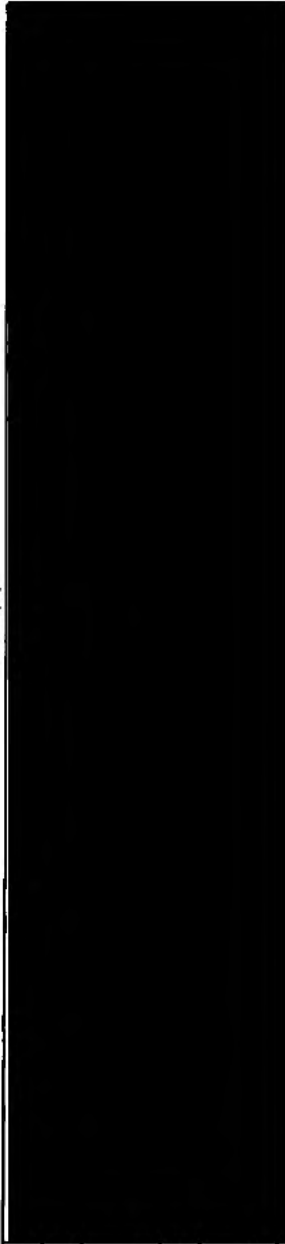
A

Timesheet - week ending 11/28/14

date	hours	task(s)
24-Nov	6	
25-Nov	9.5	
26-Nov	4	
27-Nov		
28-Nov		
TOTAL	19.5	

DUE \$ 682.50Please make
payable to:

✓
Timesheet - week ending 12/5/14

date		hours	task(s)
1-Dec		7	
2-Dec		8	
3-Dec		4.5	
4-Dec		8.75	
5-Dec		6	
TOTAL		34.25	

DUE \$ 1,198.75 /

Please make
payable to:



Payee
Vendor ID

[REDACTED]

Account #:

12/18/2014

Invoice	Description	Discount	Amount
[REDACTED]	[REDACTED]	\$0.00	\$1,925.00
Total :		\$0.00	\$1,925.00

Timesheet - week ending 12/12/14

date	hours	task(s)
8-Dec	9	
9-Dec	12	
10-Dec	10	
11-Dec	10.5	
12-Dec	5.5	
13-Dec	1	
14-Dec	2	

40 TOTAL REGULAR HOURS @ \$35

10 TOTAL OVERTIME HOURS @ \$52.50

DUE \$ 1,925.00

Please make
payable to:

Payee
Vendor ID

Account #:

9790
9790
12/29/2014

Invoice	Description	Discount	Amount
	Voting (26 hrs @\$20/hr) approved by M. Perez, 12/20/14	\$0.00	\$520.00
Total :		\$0.00	\$520.00

Vendor ID
JD
created 12/22/14
AT

RECEIVED DEC 22 2014

	<u>Date</u>	<u>Hours</u>
	12/14/2014	2
	12/15/2014	4.5
	12/16/2014	2
	12/17/2014	5
	12/18/2014	4.5
	12/19/2014	4
	12/20/2014	4
Week Total		26 Hours

approved [Signature]

RECEIVED DEC 22

Timesheet - week ending 12/21/14

date	hours	task(s)
15-Dec	9	
16-Dec	9.25	
17-Dec	7.5	
18-Dec	10.25	
19-Dec	8.25	
20-Dec	3.25	
21-Dec		

40 TOTAL REGULAR HOURS @ \$35 - \$1,400
 7.5 TOTAL OVERTIME HOURS @ \$52.50 - 393.75

DUE \$ 1,793.75 ✓

Please make
payable to:

posted 12/29/14 ✓

overhead - Myra Pen

Payee
Vendor ID

Account #:

9784
9784
12/29/2014

Invoice	Description	Discount	Amount
	Voting (40hrs @\$20/hr) approved by M. Perez, 12/20/14	\$0.00	\$800.00
Total :		\$0.00	\$800.00

RECEIVED DEC 22 2014

BRENNAN CENTER WORK HOURS INVOICE

Submitted Monday, Dec. 22, 2014



new vendor ID
created 12/22/14
AK

5.5 = Friday, Dec 12

4.0 = Sun, Dec 13

7.0 = Mon, Dec 14

8.5 = Tues, Dec 15

4.5 = Wed, Dec 16

7.5 = Thurs, Dec 17

3.0 = Friday, Dec 18

Total Hours=40 hrs @\$20 = \$ 800.00

approved [Signature]



2

Payee
Vendor ID

Account #:

8399
1/7/2014

Invoice	Description	Discount	Amount
		\$0.00	\$3,800.00
<div>CC to Vishal Agraharkar</div>			
Total :		\$0.00	\$3,800.00

*This Invoice is for work performed from
November 30 thru December 9, 2013.*

Check should be made payable to:

[REDACTED]

[REDACTED]

Total Amount Due: \$4000.⁰⁰

[REDACTED]

Perez, Myrna

Subject: [REDACTED]

From: [REDACTED]

Sent: Monday, December 23, 2013 11:33 AM

To: Perez, Myrna

Subject: Re: [REDACTED]

Here with [REDACTED] and these is what he has done so far thru December:

11/30/2013 2 hours

12/01/2013 4 hours A

12/09/2013 4 hours L

12/09/2013 3 hours

12/10/2013 4 hours Y

12/15/2013 4 hours

12/17/2013 6 hours A

12/18/2013 5 hours Y

12/19/2013 6 hours

Of all these contacted, we will go back and interview the one's that we believe we can send you for further review.

Thanks,

[REDACTED]

[REDACTED]

Payee
Vendor ID

Account #:

9844
9844
1/13/2015

Invoice	Description	Discount	Amount
	Photo ID work, 16hrs@\$20/hr	\$0.00	\$320.00
Total :		\$0.00	\$320.00

@\$20 per hour

approved 11/5/2015

Timesheet - week ending 12/12/28

12/28/14

date	hours	task(s)
22-Dec	9.25	
23-Dec	7	
24-Dec	4	
25-Dec	-	
26-Dec	8.6	
27-Dec	5.5 3.5	
28-Dec	-	

~~33.75~~ 29.75 TOTAL REGULAR HOURS @ \$35

DUE \$ 1,041.25

Please make
payable to:Pat Almonrode
301 W. 108th St., Apt. 9A
NY, NY 10025
227-86-5047

Timesheet - week ending ~~1/4/15~~

12/30/14

date	hours	task(s)
29-Dec	7.5	
30-Dec	8.75	
31-Dec		
1-Jan		
2-Jan		
3-Jan		
4-Jan		

16.25 TOTAL REGULAR HOURS @ \$35

DUE \$ 568.75

Please make
payable to:

M. J. [Signature] approved 1/5/2015

Payee
Vendor ID

Account #:

9841
9841
1/13/2015

Invoice	Description	Discount	Amount
	Photo ID work, 29.5hrs@\$20/hr	\$0.00	\$590.00
Total :		\$0.00	\$590.00

BRENNAN CENTER WORK HOURS INVOICE
Submitted Monday, Dec. 31, 2014 ✓



Total Hours= 29.5 hrs

(Pay Period Beginning Dec. 22 and ending Dec. 31).

@ 20 per hour

M. J. [Signature] approved 1/5/2015